E K Russell
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Vol. XVII. No. 9

THE CANADIAN NURSE

AND HOSPITAL REVIEW

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THE

CANADIAN NURSE

A Monthly Journal for the Nursing Profession in Canada

Editor and Business Manager.....MISS HELEN RANDAL, R.N.

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Graduating Exercises and Canadian Nurses

BY AN ENGLISH GUEST.

We received an invitation to attend "the Graduating Exercises of the Public General Hospital Training School for Nurses" and, having once upon a time gone through the course from raw probationer to sister in an English general hospital, I was very keen to attend. All things are possible in Canada, and I vaguely wondered if the unfortunate nurses would undergo some sort of a public viva voce examination.

The great night came, and, just as it always happened in England, my Better Half was detained, this time by a babies' clinic which was being inaugurated in this "city" (all Canadian towns of 10,000 inhabitants become, automatically, cities), and as no other medical man knew anything about babies' clinics except my husband, he was deputed to start the ball rolling. I telephoned to the wife of another medical man who was born and "raised" here, and from whom we had already received

much kindness, asking if she intended going, and, if so, whether I might go under her wing. She replied that she would have much pleasure in taking me and telling me who all the people were. She was very much surprised when I told her we had no "graduating exercises" in England—a statement which called forth the remark that "she thought the English were funny ; but I did not like to tell her that she could not possibly have thought the English as "funny" as I thought the Canadians!

I think it was quite the prettiest and certainly the most unusual sight I had ever seen in my life. The ceremony was held in the Methodist Church (another funny thing in Canada, there are no chapels)—an enormous building. A platform had been erected, or was already there, in front of the organ, and literally embowered in the most beautiful display of flowers—enormous baskets of lovely roses and carnations, and great mases of lilac and trailing green stuff. The first two or three rows of pews were reserved for the hospital staff, the guests of the Hospital Board, and the "Ladies' Assisting Society." This, I take to be a sort of Ladies' Committee, as I have just been appointed a member of it myself, but have not yet attended a meeting. We found ourselves in the front pew of all, quite a "preserved" seat, as my children used to call them. The organ pealed forth a lively march, and the graduates processed from the vestry two by two. There were twelve of them, and, to my amazement, they were followed by twelve tiny girls dressed in party attire, who seated themselves behind the graduates in this bower of roses.

When I was a probationer it was the correct thing to scrape your hair back from your face, and the nearer your back coiffure approached to a halfpenny bun or even a boot-button in size, the more approval we received from matron. Also we wore Sister Dora caps plastered on, and high linen collars and long skirts; nor was it considered good form to have high heels. These visions of loveliness were not content with skirts seven inches from the ground, in the approved Red Cross V.A.D. style. Their skirts were barely three or four inches below their knees, and they all wore white silk stockings and white kid shoes with very high heels. Their dresses were of white organdie, and aprons, too, but they had a sort of fichu arrangement which formed the bib of the apron in front and came down to a peak at the back. Their caps were bordered with narrow black velvet ribbon. I gave myself a shake to make quite sure that I was not at some musical comedy with a chorus of musical-comedy nurses. As a matter of fact, allowing for the difference in caps, the damsels in "The Quaker Girl," if they were arrayed all in white, would give the best idea of the attire of the graduating nurses, and the demure way they subsided in their seats and their coy glances round were too beautiful for words. Mrs. B. said they "all looked too 'cute for words."

The Chairman of the Hospital Board then called on the Methodist minister to pray, on the male glee party for a glee, and on the Baptist minister for an address. He told the graduates to "be good, sweet maids," etc. Then a damsel in pink played on the harp, and one of the medical

men followed with another speech. He also exhorted the graduates to be good, sweet maids, and the male glee party "favoured" with another glee. Then very solemnly the Presbyterian minister arose and requested the congregation to "stand while the Florence Nightingale pledge was administered" to slow music from the organ. By this time I was literally, for the first time in my life, realizing what it is like to be in "inward convulsions," a condition so beloved of out-patient mothers in my old probationer days. Dr. B. was called on for a speech next, but he contented himself by congratulating the beauteous damsels and subsiding, and then the certificates, each rolled and tied with blue and white satin ribbons, were handed to the graduates by the Chairman of the Hospital Board, badges pinned on each by the Ladies' Assisting Society, and then the little girls offered the beautiful baskets of roses, together with gifts from old patients, to the nurses, and the party walked out. The guests and the nurses all repaired to the Sunday-school room for refreshments, to be followed by a dance.

As my husband and I went home together I was quite certain of one thing—I had never enjoyed anything so much since I came out to Canada!

—*The Nursing Mirror.*

The Question of a "Code of Nursing Ethics and Etiquette" for Canadian Nurses

Madam President and Members of the Canadian National Association of Trained Nurses:

I am pleased on this occasion to introduce, upon request, the question of the preparation and adoption of a Code of Nursing Ethics and Etiquette for, and by, Canadian nurses.

It seems advisable, and opportune, that we in Canada should have something "Made-in-Canada," not only in this particular, but in the matter of text-books, generally, for use in our Training Schools. (Possibly with the proposed revision of the Canadian copyright laws, which I understand is now in effect, there may be some inducement to Canadian writers to produce books of all kinds in greater numbers in the future).

To my knowledge there is no prepared Code of Nursing Ethics in Canada, other than those of American publication, namely: "Nursing Ethics," by Hampton-Robb; and "Studies in Ethics for Nurses," by Charlotte A. Aikens; both books are excellent productions, and most fittingly expressed. Hampton's Ethics, however, has some limitations, in meeting the requirements of the extended field of nursing, as it applies mostly, almost exclusively, to the pupil in training, and the institutional

graduate nurse, with some reference to the private-duty nurse.

A more complete code may be prepared to meet the requirements of present day developments, in special branches of nursing, and organization.

As an initial step, I would advise that a committee be appointed, whose duty it would be to prepare such a code, and present it for adoption at the next annual convention.

This proposed code may be titled "Principles of Nursing Ethics and Etiquette of the Canadian National Association of Trained Nurses."

Its introductory may consist of the Definition of Ethics and Etiquette, in their general sense.

Chapter 1 may consist of General Consideration: Ethics and Etiquette, as they apply to the professional, social, and business life of the nurse; organizations; members of an organization; organizations to each other; the Alma Mater; officers of the hospital and training school; the alumnae association; the medical profession; the incapacitated member of the profession; the public generally, etc.

Each one of its chapters may be representative of some special branch of the nursing field, and prepared by a representative of each respective branch, who will be a member of the committee on preparation.

Photogravure illustrations, throughout, of great characters; short essays on character, and character building; and the Florence Nightingale pledge, may be added, as special settings.

The Advisory Committee may consist of the executive committee of the C.N.A.T.N., and with this committee the special committee confer from time to time, at regular intervals, until the book is completed. In order to facilitate the best results, it may seem advisable that the committee members co-ordinate their work, so that their progress may be somewhat parallel, in readiness for consultation.

The following books may be used as references: Ethics of Nursing, Hampton-Robb; Nursing Problems and Obligations, Parsons; Notes on Nursing, Nightingale; Talks to Pupil Nurses, Nightingale; Ethics, Dewey and Tufts; Manual of Ethics, MacKenzie; Social Psychology, McDougall; Talks to Teachers, James; Making of Character, McCunn; Studies in Ethics for Nurses, Aikens.
Essays, Emerson; Every-Day Ethics, Cabot; What Men Live By, Cabot;

There are also several prepared codes of medical ethics, easily available, of these I may mention the following: Principles of Medical Ethics, Alberta Medical Association; Medical Ethics and Etiquette, Dr. Austin Flint; Medical Ethics, American Medical Association; Medical Ethics and Cognate Subjects, Dr. Sprague. Special mention may be made of the latter, as being most unique in its style of subject matter, being

largely made up of addresses, brief, and to the point on such subjects as the following:—

"The Therapeutics of Bluff," "Doc Sivers," "The Perfect Doctor," "The Seven Ages of the Doctor," "Fuss, Feathers, and Foolishness," "Mother's Fool," "The Doctor's Dream," "Where's the Tuppence?" "A Dog, a Pipe, and a Woman," "31 Don'ts for Doctors," and several very sketchy poems dealing with the doctor mostly, but in a few instances with the nurse, to quote: "The greater masters of the common-place, Rembrandt and good Sir Walter, only these could paint her all to you: Experienced ease and antique loveliness and ponderous grace; the doctors love her, tease her, use her skill. They say, "The chief, himself, is half afraid of her." (These quotations I am convinced will place Dr. Sprague's book in the forefront of selection by our special committee).

In the other medical codes, ethics is presented under the following headings: "The duty of the physician to his patient," "Upholding the honor of the profession," "The duty of medical societies to each other," "The duty of the profession to the public," "Fees, consultations, gratuitous service," etc., etc.

In preparing this Code of Ethics and Etiquette for Nurses, I would advise that the seriousness and dignity necessary in the principles of ethics, and etiquette, be here and there relieved by a few witty anecdotes, and appropriate bits of poetry, in order to make it agreeable reading.

It has been suggested that the cost of producing this book may be offset by the revenue obtained from its sale to the various training schools, organizations, and individual members, and others who may be interested in the subject. I would like to suggest that members present pledge their personal subscription, while here, by their signatures, as an evidence of good faith and future support.

Concrete instances of the need of this proposed code are not herein specified, being considered unnecessary, in view of the fact that few of us —if any?—have escaped the experience of errors and shortcomings in our own actions, as well as in those of others; hence the acknowledged need of a written code which will serve to give us, one and all, an occasional gentle reminder.

Respectfully submitted,

MARY A. CATTON,

Read at the C.N.A.T.N. Convention, Quebec, 1921.

Victorian Order of Nurses for Canada

The annual meeting of the Board of Governors on the 11th of May was perhaps one of the most important in the history of the Victorian Order of Nurses for Canada.

A conference of the executive nurses of the Order was called one week prior to the annual meeting at which the nurses discussed the workings of the Order during past years and made valuable suggestions as to the future policy and administration. These recommendations were laid before the Executive Council at the close of the conference and then presented to the Board of Governors by the Chief Superintendent.

The annual meeting was adjourned in order to allow the local associations to pass an opinion on the contemplated changes. The adjourned meeting was held June 8th, Her Excellency the Duchess of Devonshire being present. Her Excellency expressed pleasure in endorsing the resolutions which were passed and spoke to the Victorian Order for the last time in favour of proper standards and progressive methods, of which she has always been an advocate.

The most important step was the decision to discontinue the post-graduate training in public health nursing given by the Victorian Order since its inception, replacing it with the standard courses in public health nursing provided by the various universities in Canada. This will standardize public health for the Dominion and be an advantage to the general public as well as the nursing profession. To encourage nurses to take the university courses, the Order is offering scholarships. Nurses securing these scholarships will be required to pledge one year's service to the Order upon successful completion of the course, at prevailing salaries. The universities at which these scholarships will be given are: McGill, Montreal; Toronto University; Dalhousie College, Halifax; Western University, London, Ontario; and British Columbia University, Vancouver.

Another matter of interest to public health nurses discussed at the conference was the definition of the Aims and Objects of the Order in the Royal Charter, which read:

The Objects of the Order, are:—"To supply nurses, thoroughly trained in hospital and district nursing, and subject to one central authority, for the nursing of the sick who are otherwise unable to obtain trained nursing in their own homes, both in town and country districts."

The work of the Victorian Order has frequently been defined as bedside nursing, but bedside care and district nursing are two distinct terms. Florence Nightingale said of district nursing, "nurse the family, nurse the home," which is exactly what every district nurse must do; bedside care is only the preliminary. Though the conference realized that the

Charter had been drawn up twenty-two years ago by the Honorable Mr. Justice Burbridge and Sir John Bernoit, at a time when there was no professional body of public health workers to guide them in their use of terms, and their broad outlook was shown by the use of the term "thoroughly trained in hospital and district nursing," the nurses asked that this paragraph be changed to read as follows:

> The Objects of the Order are: "To supply nurses, thoroughly trained in hospital and public health nursing, and subject to one central authority, for the nursing of the sick, the prevention of disease, and the promotion of health."

In order to explain the necessity for this change, they deemed it well to define the term "public health nursing," which reads:

> "Public health nursing is a branch of nursing service which includes all phases of work concerned with family and community welfare, with bedside nursing as a fundamental principle and developing from it all forms of educational and advisory administrative work that tends to prevent disease and raise the standard of the health of the community."

The amendment was endorsed by the Board of Governors, and the definition was considered to be exactly the expression of their conception of the work of the Victorian Order in Canada in the field of public health.

This forward policy of the Order will produce the happy result of drawing all branches of the nursing service in the Dominion together and will be a further encouragement to graduate nurses taking up public health work.

Any graduate nurse in good health, and able to meet the educational requirements of the several universities, who is in need of financial assistance to enable her to enter for the course, can make application for a Victorian Order scholarship by applying to the Victorian Order of Nurses for Canada, Room 4, Holbrook Chambers, 104 Sparks Street, Ottawa, Ontario.

J. CHARLOTTE HANNINGTON.

Registered Nurses' Ezaminations

University of Saskatchewan

Diseases of Children.

1. How would you prepare and keep bottles for artificial feeding of infants?
2. (a)—What is marasmus?
   (b)—What are the very important points to be observed in caring for a child with a tendency to marasmus?
3. (a)—Describe the stool of a baby suffering from very severe intenstinal indigestion.
   (b)—What advice would you give a mother with a view to the prevention of summer diarrhoea in children?
4. What are the predisposing causes and the exciting cause of lobar pneumonia?
5. (a)—Give cause of Ophthalmia neonatorum and the probable results, if the disease is not arrested.
   (b)—Mention some important points to be remembered in the care of gonorrhoeal infection of the eye.

Obstetrics.

1. What is meant by the terms:
   (a)—Presentation.
   (b)—Liquor amnii.
   (c)—Lochia.
   (d)—Precipitate labor.
   (e)—Dry labor.
   (f)—Puerperal septicaemia.
   (g)—Secundines.
   (h)—Ophthalmia neonatorum.
2. Describe your management of a maternity case in labor until third stage is over, in absence of a doctor.
3. What would be your treatment of
   (a) mother from time Placenta is expressed until tenth day.
   (b) child from time of birth until tenth day.
4. How would you control profuse hemorrhage from uterus immediately after delivery? What drugs are used to assist in control of hemorrhage at this time?
5. Give your advice to an expecting mother
   (a) as to her mode of living during pregnancy.
   (b) what preparations she should make for the confinement.
6. What is Ecclampsia. What signs would lead you to believe a patient to be in danger of Ecclampsia?

Hygiene, and Preventive Medicine.

1. Give general rules for the prevention of the spread of Tuberculosis.
   What precautions would you take for the protection of yourself and others in nursing such a case?
2. Give general rules for the protection of your own health during training or as a private nurse.
   What measures would you advise to keep yourself in good condition?

3. Name two contagious diseases against which the public may be positively immunized and state what preparations would be used for this purpose, in each case.
4. Give general rules for the prevention or cure of constipation.
5. Name some factors that tend to retard the normal growth of a child, and state how they may be remedied.
6. Name three methods by which germs may be destroyed.

NOTE.—Answer any five questions.'

Dietetics and Nursing Ethics.

1. (a)—Give general rules for feeding the sick.
   (b)—Give four points to be observed in the preparation of an invalid's tray.
2. Discuss diet in Nephritis, Diabetes, Typhoid.
   (b)—Show that diet is based on the pathology of all disease.
3. State in detail how to cook
   (a) a steak
   (b) a chop
   (c) a piece of bacon.
4. Describe a nurse's duties in private work as concerns
   (a) Personal appearance and habits
   (b) Obligations to patient, physician and family•
   (c) Conduct in sickroom.
5. What should be the attitude of the nurse towards hospitals?

Surgical Nursing, Operating Room Technique and Gynaecology.

1. (a)—Classify burns according to their severity and describe condition in each degree of burn.
   (b)—Give emergency treatment and state complications that are to be watched for.
2. Define gangrene, embolus, hysterectomy, salpingitis, ööphorectomy.
3. (a)—Give preparation of patient for abdominal operation given 24 hours in which to prepare.
   (b)—Give preparation of patient for mastoid operation.
4. (a)—How would you prepare yourself to assist at an abdominal operation?
   (b)—Name four kinds of suture material and state when each is used.
5. Give signs and treatment of post operative shock.
6. (a)—Give signs that would lead you to suspect an ectopic gestation.
   (b)—What is the usual treatment in such cases?

NOTE.—Answer any five questions.

Medical Nursing and Materia Medica.

1. (a)—What special points are to be observed when nursing patients with cardiac diseases?
   (b)—What do you understand by "blood pressure"?
2. State the marked symptoms in
   (a) epilepsy
   (b) hysteria
   (c) apoplexy.
3. For what purpose is a turpentine enema given? (b) a starch enema? (c) Describe the preparation of and method of giving each.
4. (a) Name three Bromides and give dose of each.
   (b) Give the effect and state indications for which they are given.
   (c) Veronal—give dose—state effect and when indicated.

5. Define the following: cathartic, anodyne, hypnotic, diaphoretic and emmenagogue.
6. (a) What is meant by idiosyncracy? Explain fully.
   (b) What is meant by vaccines and serums. Give examples.
   (c) How is anti-diphtheric serum procured and on what principle does its action depend?

Report of "Inter-Relations Conference"

(At the 41st Annual Meeting of Ontario Medical Association, Clifton House, Niagara Falls, June 1st, 1921.)

The results of this meeting, presided over by Dr. Mullin, Hamilton, will be far-reaching and of lasting benefit.

The Round-table Conference was most illuminating and inspiring. The following associations were represented: Medical, Graduate Nurses' Association of Ontario, National Association of Nurse Education, Federated Women's Institutes, Dental, Electrical Engineers, Rotarians, Manufacturers, Labor Education, and United Farmers.

Each delegate, on being introduced, was greeted most cordially, and their remarks listened to with respectful attention. It was indeed an honor and a privilege to be present, as each one asserted, for we were assembled to give a most affirmative answer to the query, "Am I my Brother's Keeper?" and to negotiate as to the best methods of procedure to co-ordinate our services, so that the greatest possible good to humanity may be the ultimate result. The various organizations with their diverse duties, each having particular interests, yet all functioning for general welfare. With all, the trend is for the highest standards. In this respect the Medical and Nursing Associations must of necessity take the lead, for with us rests the care of the most sacred thing on earth, "Human Life." Reference was made to lack of proper medical and nursing service amongst people who are unprepared to pay large fees. On behalf of the nursing profession, the report of the Public Health Nurses, School Nurses, Victorian Order, and others, regarding services rendered, without remuneration from those with inadequate funds, was given; also a statement of the number of nurses in Ontario specially detailed for that purpose. An assurance was given that the graduate nurses would assist in every way possible, ready to render practical aid in coping with existing conditions.

It was proposed that similar conferences would occasionally be held, thereby perfecting what now is evidently the desire of each human heart for a greater and a better world.

To the President and members of the Graduate Nurses' Association of Ontario, the foregoing report is respectfully submitted.

AGNES M. JOSEPH,
G.N.A.O. Representative to Conference.

London, Ont., June, 1921.

Editorial

September again! Holiday time over and associations as well as individual nurses are back again ready for the work of the year. The Canadian Nurse magazine asks particularly that the needs of the journal be placed in a prominent place in the year's programme. At the Convention in Quebec each delegate was asked to carry back to her association the importance and urgency of taking a much more active part in helping both financially and with contributions than any one of them has done in the past. Three Alumnae Associations—all in Toronto—have increased their fees to include the subscription price of the magazine. If that plan is not thought to be advisable, then an active committee should be formed and the matter steadily pressed through the year. The enthusiasm shown at the convention should not be lost but be used in a practical way to improve and enlarge our own journal.

* * * *

Superintendents of training schools are again reminded that they may obtain 150 specially selected slides, illustrating Dr. Maude Abbott's History of Nursing, for the small price of $75.00 for the set. Additional slides may be obtained at forty cents each. For further information, address Dr. Maude Abbott, care of the Medical Library, McGill University, Montreal, Que.

* * * *

To see ourselves as others see us is sometimes a salutary thing if not altogether a pleasant one. The reprint from *The Nursing Mirror* "Graduating Exercises and Canadian Nurses" will surely amaze most of us Canadians who are proud of our schools and the high standards we have always kept. Such uniforms (?) as are described must certainly be quite unique and only seen in that particular school described, "for after many years knowledge of training schools in this country, the Editor is forced to confess that she has never had the opportunity that our English friend had. Surely we should have been surprised as well as our guests at dresses and aprons of organdie with skirts barely three or four inches from their knees. If the Superintendent of this school recognizes her graduating exercises in this description, it will be an opportunity of "seeing ourselves as others see us."

Student Self-Government at Christ Hospital.

Discipline is a matter of internal adjustment, spontaneous internal control, and does not properly get its significance when it is obtained by means of force or by any suppressive measures. Co-operation, to be effective, must come from within and can not be forced. Modern ideas of society stress the fact that our social organization is a co-operative function. Order cannot be said to prevail among people going in the same direction at the same pace. It does not exist when persons are constantly colliding one with another. But when all who meet or overtake one another in crowded ways take the time and pains needed to avoid collisions, the throng is orderly. At the bottom of the notion of social order lies the same idea.

Student self-government is the laboratory method of learning citizenship and self-control. To develop a feeling of individual responsibility is the ideal both of the class-room and the disciplinary side of school life. One of the objects of school is to make social beings and that means conventional men and women who can move in the existing social order with the least friction and the least external force. It has been said that no school is a good school until it governs itself. The same may be said of any individual in any society, that is, she must govern herself by the conventions of that society without friction.

Opportunities for individual participation are abundantly provided in their social activities. The pupil has the dignity and responsibilities of a citizen rather than the submissiveness and awe of perchance the indifference or rebeliousness of a subject. Standards of thinking and conduct are gradually evolved. Any form of school government which promises even a measure of improvement deserves consideration and trial.

Such a trial is being made of student self-government at Christ Hospital in Cincinnati. The object of this organization is to: (1) to control the conduct of nurses when off duty; (2) to administer the training school regulations pertaining to the Nurses' Home; (3) to install and promote the honor system in all matters pertaining to school life; (4) to control the breaking or defiance of rules and regulations. All reports of breaking or defiance of rules and regulations are made to the Student Council which acts upon them, with the privilege of consulting the Advisory Committee of the Faculty. The Student Council is a committee on self-government, consisting of the officers of the League and representatives elected from the Senior, Junior and Sophomore Classes.

All meetings are conducted in an orderly and dignified manner. "Student Handbooks" that set out in detail student activities indicate student control through "upper classmen," probationers being rather the governed.

Although our organization is quite young here, it promises to become a permanent part of our institution. With the confidence and support of the faculty and with student sentiment ready and willing to assume large responsibility for social order, the hospital training school may expect constructive results from the introduction of a carefully planned scheme of self government.

In order to succeed, the student government must conform to the following conditions:

1st. It must be in the hands of a serious-minded and law-abiding body of students.

2nd. Students must understand at the outset that self-government is of necessity limited.

3rd. The limitation of the functions of student government must be made perfectly clear.

It can control all matters pertaining to student discipline and should concern itself especially in maintaining high moral tone in the student body.

Student self-government is not a fake or a show, but a real solution of some of the difficult disciplinary problems that arise. The students have come to regard the school as their own school in a sense they had never experienced before. A feeling of personal pride and interest now attaches itself to every phase of school activity.

MARY EMILY PUTMAN,
President Student Government League.

For we must share if we would keep,
That good thing from above;
Ceasing to give, we cease to have,
Such is the law of love.

The *National Safety News* for May gives the following suggestion: "To prevent serious injuries to the eyes of men working in departments where acid is used the Griswold Manufacturing Company, of Erie, Pa., has installed in all such departments five-gallon crocks containing soda and water solution, so that any time an employee gets acid in his eyes he can plunge his face in the solution immediately and neutralize the acid. On the crocks are posted signs explaining to the men what they contain and how the solution should be used. The scheme has proved a great success."

News from The Medical World

By Elizabeth Robinson Scovil.

Free Treatment.

At Goteborg, Sweden, each person desiring free treatment at a dispensary must present a certificate that he is so poor as to be unable to pay a fee, or else he must pay two crowns for the advice he receives.

Prevention of Venereal Disease.

The British Ministry of Health has agreed that the best means to lessen venereal disease is, (1) abstention from promiscuous intercourse and a steady policy of public enlightenment; (2) disinfection immediately after exposure, if thoroughly and intelligently applied, which seems to be rare.

Cancer of the Tongue.

It is stated that in a recent investigation of 260 cases of cancer of the tongue it was found that the disease is due to long and continuous chronic irritation by tobacco, by repeated burns from smoking, by irritation, or direct wounds from rough, dirty teeth, or improperly fitted plates. There is hardly a record of a case where warning has not been given by definite local leisions appearing months and sometimes years before the development of cancer.

Thick Cereal Mixtures.

In cases of obstinate indigestion in infants, the use of a thick cereal mixture is advised by specialists. The first formula was 4 ounces from one quart of milk, 2 ounces of skimmed milk, 7 ounces of water, 3 level tablespoonsful of farina, 1 level tablespoonful of granulated sugar. The mixture was boiled half an hour and the children given 3 ounces every four hours with water alternately. When vomiting was present, the thick mixture did better than liquid food, and was always tried first with a spoon.

The second formula had 15 ounces of skimmed milk and 6 ounces of water, with other ingredients. The third was 4 ounces of top milk from one quart, 28 ounces of skimmed milk, 9 ounces of water, 4½ level tablespoonsful of farina, 1 level tablespoonful of granulated sugar, and the same of malt sugar. From 4 to 6 ounces every four hours. A rubber nipple can be used by enlarging the hole.

Care of the Baby's Nose.

A treatment that is said to be effective is to tell the mother to place

some warm boracic acid solution in a large basin and then put the baby's head down in the water. If the baby cries, lift it up head down, and it will clear the nose better than can be done with an appliance. Neglect of the nose is one cause of deafness.

The Four-Hour Feeding.

Dr. Thomas Southworth, New York, says that the four-hour nursing interval has proved helpful within limits. It is well suited to the vigorous normal infant nursing a normal mother. Premature infants require more frequent feeding. Babies who nurse two slowly or unwillingly, or who are too weak and empty the breast with difficulty, require a shorter interval, and then there are other cases in which it is advisable. Complementary feedings at the end of the nursing are sometimes necessary.

Childbirth Mortality.

An American physician states that the mortality from puerperal infection remains practically the same to-day as in 1900. The mortality from childbirth is second only to that from tuberculosis in women of reproductive age. Between 40 and 50 per cent. of these deaths is due to sepsis. Properly equipped maternity hospitals, to offer adequate opportunities for the preparation of obstetricians, is suggested as a remedy.

Care of Premature Babies.

Dr. H. V. Chapin, of New York, says that two things are of importance in the care of premature infants—the temperature of the incubator and the food. The latter is the most important. He considers breast milk indispensable. During the discussion it was stated that, when the breast milk cannot be obtained, modified milk peptonized may be used with success. A temperature of 76 degrees is best, as then the air can be kept moist.

Strabismus.

A French physician says that squinting can be corrected by training the vision in cases of divergent strabismus, and in the very mild and recent cases of the convergent type, if the child is young and intelligent and will co-operate. All other cases require operation.

Vaccination Against Typhoid.

The Academy of Medicine, Paris, has officially voted in favor of the vaccination of the general population against typhoid, especially in time of epidemics. In reporting cases of typhoid, it is to be mentioned whether the subject had been vaccinated before infection—the number of times and the method.

Nutritive Value of Yeast.

It is stated that flour containing 5 per cent. of yeast powder makes a palatable bread, much more nutritious than ordinary bread. The yeast supplements both the water soluble B and the protein content as a heat flour. Quantities in excess of those generally used in bread improves its B nutritional value.

Public Health Nursing Department

Address public health news items from each province to the following representatives:

Nova Scotia
Miss Margaret McKenzie,
Department of Public Health,
Halifax.

New Brunswick
Miss Sarah Brophy,
74 Carmarthen Street,
St. John, N.B.

Quebec
Miss Sarah Fraser,
110 Crescent Street,
Montreal.

Ontario
Miss Muriel McKay,
Industrial Nurse,
Ontario Hydro Commission,
University Ave., Toronto.

Manitoba
Miss Elsie Wilson,
798 Grosvenor Avenue.
Winnipeg.

Saskatchewan
Miss Edna Morgan,
Normal School,
Regina.

Alberta
Miss Genevieve deTurbeville,
Prov. Public Health Dept.,
Edmonton.

British Columbia
Miss M. A. McLellan,
1883 Third Avenue, West.
Vancouver.

MISS F. EMORY,
Chairman of Section,
City Hall, Toronto, Ont.

Synopsis of Provincial Reports on Development of Public Health Nursing as read at Public Health Section, C.N.A.T.N., Quebec, P.Q., June, 1921.

That public health nursing in Canada is progressing, and that widespread interest is taken in this phase of the profession was demonstrated during the annual meeting of the C.N.A.T.N., held in Quebec in June of this year, at which an entire day was devoted to the proceedings of the Public Health Section. At this meeting reports were read from the various provinces describing public health activities, which have been in operation some time, and also the more recent developments in this branch on nursing.

Space forbids a detailed report of these most interesting papers, and in the following condensed report some details may be omitted. We have endeavored, however, to neglect none of the recently established public health activities through which an attempt is being made to teach Canadian citizens that, especially in matters relating to health, "prevention is better than cure."

Nova Scotia.

The health laws of the Province of Nova Scotia are such that responsibility for their administration devotes almost entirely upon the local authorities. As a result, a satisfactory central (provincial) organization is necessary in order to supervise and co-ordinate the work of the local board of health. For this purpose the Governor-in-Council has now authority to appoint, in addition to the Provincial Health Officer, one Inspector of Health, three Divisional Medical Health Officers, a Superintendent of Nursing Service, and such members of public health nurses as may be required. Provision has also been made for the establishment of one or more public health clinics in each county.

As qualified public health nurses were not available, a course was established at Dalhousie University in March, 1920. Two graduating classes, however, have proven sufficient to meet the demand.

Through the generosity of the Provincial Red Cross Society, $25,000 was donated to the Provincial Department of Health for the maintenance of a trained public health nurse in each county for a year for demonstration purposes. Nine counties have commenced this work; three more are starting in June, and it is hoped that shortly every county will be supplied, and that at the end of the year the counties will undertake the financial support of these nurses.

The Provincial Red Cross, during the summer of 1920, equipped and sent to the most remote parts of the Province health caravans for demonstration purposes. These caravans were staffed with expert medical, dental, and nursing services, and were a form of health advertising that did excellent work. The cities and several of the larger towns maintain their own nurses, Halifax employing a staff of four nurses. Auxiliary classes are well established and especially trained teachers employed in four schools. Nutritional and out-door classes are also held, and the sight-saving class-room is considered the best of its kind in Canada.

The work of the Massachusetts-Halifax Health Commission is known all over the continent and is a model of organization and service.

The Victorian Order of Nurses are doing splendid work throughout the cities and towns of Nova Scotia. They have a staff of about twelve nurses in Halifax, six in Sydney, two in Dartmouth, two in Truro, and one in New Glasgow, Yarmouth, Digby, and Canso.

New Brunswick.

During the past year considerable progress has been made along public health lines in New Brunswick.

In September, 1920, a most successful child welfare exhibit was held in connection with the provincial exhibit and was a means of giving instruction to fully 60,000 people. During the summer months a graduate nurse was employed by the local Red Cross Society to tour the province in the interests of that body and to bring before her audiences the policies and administration of the Provincial Department of Health.

During April last a "Health Week" was held throughout the province, and so successful was this campaign along educational lines that the following public health associations were formed:—In Fredericton, a Child Welfare Association; in Moncton, an Association for Combating Venereal Disease; in St. John, a Tuberculosis Association, this association employing two nurses to carry on their work. In St. John, as in other parts of the province, much of the public health nursing is done by the Victorian Order of Nurses. Early in the year the local branch of the V. O. N. was authorized by its central council to open a school for public health nurses in order to meet the demand of the rural districts of the province.

The course of instruction lasted from February 1st to May 31st. Graduates volunteering to serve their own province for one year will be placed by the Minister of Health in the rural districts most needing their assistance. The Red Cross Society is financing the expenses incurred by the Department of Training.

In order to combat venereal disease, the Provincial Department of Health has recently appointed three medical officers throughout the province to preside over clinics and register known cases suffering from this malady.

The Red Cross Society has recently donated $20,000 to the Provincial Department of Health for public health purposes and $3,000 for the maintenance of a nurse in the departmental office.

A summary of the nurses actively engaged in the province in public health nursing is as follows:—St. John, 14—10 Victorian Order, 2 Tuberculosis, 1 Board of Health, 1 Out-Patient General Public Hospital; Fredericton, 1; Moncton, 2; Marysville, 1; Sackville, 1. Total, 19.

Quebec.

In Quebec, throughout the province, there are between 60 or 70 Victorian Order nurses carrying on all lines of public health nursing.

The Metropolitan Life Insurance Company has 33 nurses engaged in work similar to that done by the V. O. N.

The Department of Public Health in Montreal employs 17 physicians, 34 public health nurses and 1 dentist.

Child Welfare Organizations are doing important work in the Province of Quebec. Montreal operated 36 milk stations, with an additional six located in school buildings during the summer vacation. There are also two baby camps held in public parks, with nurses and physicians in daily attendance.

In Montreal tuberculosis nursing is carried on by the Royal Edward Institute and city dispensaries, with a staff of ten visiting nurses. A great deal of tuberculosis nursing is also done by the Nuns.

Laval Hospital has opened a summer camp for children at Quebec, accommodating 100. A similar camp has been opened by the Royal Ed-

ward Institute at St. Agathe, accommodating 45 children.

The Superior Board of Health is establishing dispensaries for tuberculosis and infant mortality, each dispensary under the direction of a competent physician and public health nurse. Dispensaries will be opened this year at Riviere-du-Loup and St. Hyacinthe.

At Thetford Mines a Maternity Centre was begun last March, where clinics are held under the title "School for Mothers." This work is under the supervision of a trained nurse with a staff of two nurses.

During the year the Child Welfare Association organized a "Health Drive," when ten localities were visited in the eastern townships by a group composed of one doctor, three public health nurses, and a social worker. As far as can be ascertained, hospital social service in Quebec is carried on in Montreal only, a number of the prominent hospitals employing nine graduate nurses and five social workers.

The Canadian National Committee of Mental Hygiene employs two nurses. The Soldiers' Civil Re-establishment Medical Social Service employs three workers, all trained nurses.

All social service work in connection with Roman Catholic hospitals is done by Nuns.

Twenty-six nurses in all are employed in industries. The Women's Directory has recently added a nurse to their staff, who has just completed her course in the School for Graduate Nurses established by McGill University. The establishment of this University course for nurses opened September, 1920, by McGill University, marks an epoch not only for the Province of Quebec, but for the whole of the nursing profession.

Public health nursing in the province, being a comparatively new development, lacks organization, but its future is assured.

Ontario.

Among the developments of public health activities in Ontario, it is interesting to note the success that is attending the demonstration plan carried on by the Provincial Department of Health. The Provincial Society of the Red Cross is paying the salaries and expenses of eight public health nurses for one year. These nurses are controlled and supervised by the Provincial Department of Health. It was hoped thereby that municipalities would realize the benefit of such a nurse in their community, and, as a result, appoint one of their own. The hope was not misplaced, and to date seventeen municipalities have definitely decided on having their own public health nurse.

Another innovation introduced by the Provincial Health Department is a motor tour being made by a pediatrician and public health nurse through the province and known as "The Child Welfare Special." Clinics are held at different points, and the plan is meeting with great success.

The school health division of the Provincial Department of Educa-

tion, last January, appointed a chief school medical officer. This division has in the field 7 doctors, 7 public health nurses engaged in survey work in the schools of the province, and five other nurses doing demonstration school nursing. Success has attended these efforts, and 11 municipalities have appointed school nurses.

The three Provincial Health Organizations interested in public health nursing—the Department of Health, the Department of Education, and the Red Cross—have encouraged the development of local health activities, and public health nurses are being employed in increasing numbers by private and public agencies, but a complete census is not available.

The most encouraging feature of the situation in Ontario is the effort being made to advance the standard of nurse education.

Two short courses were provided during the summer of 1920, one under the Department of Education for nurses engaged in school work, and a three-months' course under the joint auspices of the Department of Health and the Provincial Red Cross.

The University of Toronto established in September a Department of Public Health Nursing, financed by the Ontario Division of the Red Cross. Fifty nurses were enrolled, 47 of whom received diplomas at the graduation exercises held in May.

Manitoba.

In Manitoba the Provincial Board of Health employs 43 trained nurses for public health purposes throughout the province. This department co-operates with many social and government bodies, particularly in the interest of child welfare. Five new child welfare stations have been opened in the past year, making a total of seven now in operation.

In June, 1920, an agreement was made with the Manitoba branch of the Canadian Red Cross Society whereby three nurses of the Provincial Board of Health would be stationed in unorganized or isolated districts, these nurses to be controlled and supervised by officials of the Provincial Board of Health.

The Red Cross Society provides the furnishings of the cottage or rooms where the nurse is stationed, also salary, equipment, and nurses' expenses. The nurses' residence includes a hospital ward, which is also used as a health centre. The districts decided upon were Kinosota, Reynolds and Fisher branch. The activities of these centres are too many to enumerate rendering their services to the community of inestimable value.

In Winnipeg, school inspection is carried on by a staff of 12 nurses under the Winnipeg School Board.

District nursing is done by two organizations, one, the Margaret Scott Nursing Mission, with a staff of five graduate nurses, two pupil nurses from the Winnipeg General Hospital, and one service sister who is not a nurse, but who goes into the homes and assists when needed

with housekeeping problems; the other, the Victorian Order of Nurses, who maintain a staff of thirteen. These nurses, in addition to routine public health nursing, have started "Mother Craft Classes" and Mothers' Clubs, which are helping to meet the need for more pre-natal instruction.

The Department of Health in Winnipeg employs four nurses for tuberculosis nursing and clinics. This department also controls the bureau of "Child Hygiene," which employs thirteen nurses. Hospital Social Service employs four nurses. During the past year a pre-natal clinic has been established in connection with the Out-Patient Department of the Winnipeg General Hospital.

Nutritional clinics have also been started and have been wonderfully successful.

Other nurses engaged in public health nursing in the city are the nurses attacked to the Department of Soldiers' Civil Re-establishment and the nurses doing industrial nursing who are employed by private organizations to render first aid and carry on health promotion among the employees.

Alberta.

In Alberta, public health nursing service was inaugurated in 1918, when four nurses were trained, equipped and sent out to various parts of the province.

This staff has now grown to twenty-one. It is of interest to note that not only are these nurses registered in their own province and graduates of recognized training schools, but they are also graduates of the course in public health nursing given by the University of Alberta or of a similar course in a recognized university.

These nurses perform the well-known duties of a public health nurse, such as school inspection, child welfare nursing, maternity nursing, tuberculosis nursing and venereal disease nursing. It must be remembered, however, that this work is being carried on in sparsely settled communities, where work is more difficult. Special instruction in maternity work is given the nurses rendering such service, as they are often established in a territory with no doctors. The hardships and uncertainty of life on the frontier make a vastly different life for these nurses than is lived by the public health nurse in a more settled country, but the very difficulties and dangers of the country render the nurses' services more valuable, especially in reducing the percentage of infant mortality.

With such a well laid foundation and with evidence of so much enthusiasm and energy, Alberta's campaign for public health gives promise of real success.

Prince Edward Island.

As yet Prince Edward Island has very little to report.

No organized public health nursing has been done on the Island

till the Provincial Red Cross Society made arrangements for a nurse to commence educational and demonstrative work in February, 1921.

It was thought advisable to start the practical demonstration in the schools, as in this way the nurse in her follow-up work would find the readiest method of introduction into the homes.

So far seventeen public meetings have been held in the larger towns with the object of educating the communities to the value of child welfare and general public health work.

Up to date 875 school children have been thoroughly examined, and, by the end of June, two more schools will have finished, bringing the total up to 1744 for the three counties.

In addition to the class-room talks on "Health Habits," each child, after having been weighed and measured, had his habits checked up on his record card and was advised according to his special needs. By the time this was finished the children, instead of being frightened, as many of them were at first, were keen for the last part of the work—medical inspection.

So far each local doctor has "done his bit" by helping with the physical examinations, and several who were sceptical at first became most enthusiastic before they had finished.

In every case the child has had his upper clothing removed, and as yet no complaints have come from the parents. The mothers were always encouraged to be present during the final examination, and in one school of 88 pupils 21 mothers attended.

Of the 875 already examined, over 90 per cent. have been found to have one or more defect. In addition to the defect-slip having been sent to the parents, a considerable number of homes have been visited, especially in the towns where the nurse was not likely to return for some time. While making the visits, the nurse has been able to give advice to the mothers of infants and young children, and also to expectant mothers.

By the end of June, it is hoped that one or more infant welfare clinics will have been opened and, during the summer, a great number of babies visited in their homes.

One volunteer nurse has been helping with the weighing and measuring of the school children, and a second public health nurse has just been taken on the staff.

A moving picture machine has lately been received, which will help a great deal in the work.

British Columbia.

The Provincial Division of Red Cross have undertaken to train and maintain nurses for public health work in rural districts in British Columbia, such nurses to be known as Red Cross Public Health Nurses. There are now ten centers established. Another very material assistance was given to public health work when the Provincial Division undertook

to assist in establishing and maintaining a Red Cross chair of public health in the University of British Columbia. This is to be financed for three years by the British Columbia Division of Red Cross. The first course started in November, 1920, with twenty-six graduate nurses. The course was an intensive one of six weeks with field work taken with the Victorian Order, School Nurses, Child Welfare, Social Service, etc.

The extension work has been along the line of child welfare work. A council was held on May 6th, when the project was launched. They intend to devote their energy to one particular phase of this work, mainly pre-natal work. Cards will shortly be sent out to expectant mothers and efforts made to have the legalization of expectant mothers, in order that they may receive proper information which will safeguard both them and their children. Questionnaires as to home life will also be sent to the various communities on the Island. The majority of the districts will carry on the child welfare work through organizations already existing.

The school nursing work on the Island has extended slightly. There is now a part time nurse at Oak Bay and a nurse in Esquimalt schools. There are three Victorian Order nurses in Victoria.

School nurses' work is much the same as last year, although some advance has been made in caring for the under-nourished child, and, through co-operation of some of the women's organizations of the city, milk has been given them in thirteen of our schools. We hope for further extension in the near future and to have nutrition classes established.

Child Welfare Department has now three nurses. During the year pre-history cards have come into use whereby the child of five years is examined by the nurse and all children's diseases, previous illnesses or operations are noted. If any physical defects are detected, advice is given to consult the family physician, or to attend the out-door clinic at the General Hospital and have defects corrected before starting to school. Cards are then transferred to the School Medical Department. Talks and demonstrations are given twice weekly by the nurse in charge to mothers on the care of infants. Practical instruction was given during the four months to the nurses taking the public health course in the University of British Columbia. Slips are sent in from the Victorian Order, recording all births attended by the Order, and all pre-school age cases who are discharged from the Vancouver General Hospital are sent in by the Social Service Department.

The work of the Victorian Order has materially increased during the past year in all its various branches. Toward the end of the year 1920 a Well Baby Clinic was organized at South Vancouver. This clinic is held every Wednesday afternoon. As well as the nurses, there is a medical specialist in attendance. The babies are weighed, measured and examined. The mothers are advised as to feeding their babies and as to clothing. If sick babies are brought to the clinic, they are referred to their own family physician. The attendance at the clinic is very satis-

factory, there being an average of thirty each week and about eight new ones each clinic day. The nurses carry on extensive follow-up work to these babies in their own homes.

During the past year we have started an extensive pre-natal system. As nearly as possible, every expectant mother on our list is visited twice each month and advised as to rest, exercise, food and clothing for herself, and as to cot and layette for her babe. We particularly urge every expectant mother to see her physician as early in pregnancy as possible.

We are hoping to organize a pre-natal clinic as soon as funds are available for the purpose, where there will be a physician in attendance; where the patient can be thoroughly examined and frequent urinalysis made; also where health talks can be given to the mothers. We realize that much can be done towards raising the standard of health by close attention to the expectant mother.

During 1920 the Victorian Order gave a course in Public Health Nursing to twenty students. Some of these nurses have remained on the staff, others have taken Red Cross districts, while others have returned to the United States to take up public health work in their own country.

Last November, when the short course in Public Health Nursing commenced, eight students went from the Victorian Order. They are very proud of the fact that one of their nurses won the first prize of $100.00, which was granted by the Red Cross, and another won the second prize of $60.00 given by the Provincial Department of Health. All these eight nurses, since graduation, have been placed in public health districts, and are making a great success of the work they have undertaken.

Work has gone on as reported last year in the Social Service Department of the General Hospital, Mothers' Pension and S.C.R., each co-operating with other public health organizations and each with plans for greater work when funds can be procured.

M. McKAY,
Secretary Public Health Nurses' Section.

Miss Anna M. Oram (T.G.H), who took a year's course in public health nursing at the University of Toronto, is doing child welfare work in Welland, Ont. Her address is P.O. Box 1561, Welland, Ont.

Only one day at a time. There may never be a to-morrow,
Only one day at a time and that we can live, we know.
The trouble we cannot bear is only the trouble we borrow,
And the troubles that never come are the ones that fret us so.

—*Anonymous.*

C. A. M. C. Nursing Service Department.

Concerning "Our First Glimpse of the Stars and Stripes in France."
With Laval University Unit, Troyes, October, 1917.

By Nursing Sister M. Jessie Leitch.
(St. Paul Dispatch, St. Paul, Minn.

In the old French city, twilight deepened swiftly along the boulevard, blotches of orange light blurred through the rain. Across the street a Flemish woman bent over a charcoal brazier—the half-burnt odor of roasting chestnuts filled the air. A little child in a black smock and sabots pulled her shawl over her head and clutched her mother's skirt as we approached. She was a little child with a thin, white face and wistful eyes. So we stopped and bought some chestnuts for a few centimes, then walked on, warming our fingers on the little paper sack. Raindrops spattered on the cobblestones, ran in little rivers down the flaring yellow street lamps.

A trim grey car drew up beside the fountain across the square, and our hearts jumped suddenly at the sight of the Stars and Stripes fluttering from the engine, instead of the familiar tri-color of France.

Several American officers alighted. Eagerly, we watched them—the first English speaking men we had seen for months. The door of the little Belgium cake shop banged loudly as they entered. Eagerly, we followed, for the little shop was also our destination. When we appeared they were all talking at once to the little French girl behind the counter. She was shrugging her shoulders regretfully—politely helpless. Their French was rather impossible, and we smiled, but not without sympathy. "You are Americans?" we said, advancing with wartime friendliness. Amazed, they stared. "And you are English?" they said eagerly.

"Canadians, and we haven't seen a man who spoke English since last spring," we exclaimed, beginning to shake hands all around.

Then we told them that the little shop was a favourite haunt of ours. It was famous for its chocolate, and the little cakes called "Madelins."

"We've driven countless kilos, and are starved," said a youth from Boston, who looked like one of Charles Dana's own. "Where do we eat?"

"Here, if you will. Shall we order?" And so it was that three American officers and two rain-soaked Canadian nurses met on grounds of instant good fellowship—somewhere in France.

As we seated ourselves in the little parlor behind the shop, we reminded our new-found friends that it was meatless day, also that there were many restrictions, even in this little town of "Northern France."

"Personally, I'd like a planked steak and toast and coffee and mushrooms and hashed brown"—began the man from Tennessee, as he slipped off his wet coat and stretched his long limbs before the fire.

We all laughed—even Madamoiselle, who couldn't possibly understand. But, when the crisp, crescent rolls arrived with bowels of thick, sweet chocolate, upon which the cream floated in little islands, our hungry friends were visibly cheered. The little "Madeline" cakes of pounded almond meal, and sugar, were very delicious, and not at all like wartime cakes.

As we talked, we promised our Americans a typical French dinner at one of the houses out along the canal, and a few nights later we made a merry party on the road to St. Julien.

Over our chocolate these men told us of their camp, ten kilos to the north. This was their first visit to our town, and they were simply scouting for provisions and supplies. To-morrow their transports would come over, if they had luck in purchasing to-night. Being railroad men, their's was part of the gigantic task of sending reinforcements to the Italian front. We knew that for a week or more twenty-four troop trains daily had passed through onw town—one every hour. Down at the station we had helped at the French canteen, serving bread and coffee to the men when the trains stopped. We knew, too, that these noisy, cheering men in khaki were going eagerly to the new front—glad to exchange the autumn rains of France for blue skies and Italian sunshine. We had seen them crowded into box cars, with loose straw on the floor, reading ancient copies of "The Saturday Evening Post," and howling cheerfully "Where do we go from here?" And we had gloried in their unconquered spirit as the trains came and went with their freight of fighting men and mules, transport wagons, clay-caked guns carelessly covered with canvas, the while cheery troops crowded the doorways laughing and singing as only soldiers can.

The all-important question, however, was "Where can we get a bath?" It was a familiar question among overseas people when they met in France.

So we told them of the "Bains Museum," the quaint public bathhouse beside the canal, where one waited one's turn sitting on the grass

under the apricot trees, or wandering about the wonderful old world garden, buying pots of heliotrope and musk, feeding the swans that floated on rock-rimmed lily ponds, or, on days like this, just watching the rain drip off the eaves of the long, low verandah. The French are a thrifty race, ever ready to sell their fruit and flowers, and many a franc they earn in their gardens. We wondered if the baths would appeal to these men of America, as they did to us. When part of one's life has been spent where bathing is one of life's trivial rounds, it is difficult, even amusing, to reconstruct one's ideas and regard a bath as an unwonted luxury, for which one pays by purchasing the privilege of towels, of soap, and water.

Meantime, the rain pattered against the leaded panes of the little shop, and eagerly we pointed out the quaint old treasures in the little parlor. They were familiar to us, but we longed to exploit our knowledge, I suppose. The firelight flashed on the old oak beams of the low ceiling, glinted on the old spinning wheel from Normandy. The lace cushion with its maze of bobbins and half-finished web of filminess, the old brass candlesticks, the thin blue china Madamoiselle's mother had brought away from Alsace Loraine, years before, all came in for their share of attention. Then Madamoiselle entered to light the candles, and, as a pretty compliment to our new Allies, she placed upon our table a homemade bayberry candle, remembering that the legend of the bayberry is one of kindness and good will—of friendliness. We fell silent as its gentle fragrance filled the air, and thoughtfully we watched its clear, unwavering beam. One of the things we particularly admired about the French was their readiness to pay pretty, graceful compliments to the men of America. The coming of the Stars and Stripes was a festival of welcome in France. Old and young vied with each other in expressions of joy, and it was no secret in our town that, after the landing of the first American troops, a certain merchant quietly removed the sign "We speak English here" from his window and substituted "American spoken here," in the stray hope of Americans one day arriving in our streets. And now they had come.

At length, with much ceremony, de departed; amid many charming little attentions and much French "politesse," Madamoiselle attempted to help the Gibson man into his greatcoat, but, with the true spirit of young America, he objected strenuously.

Then the mother of Madamoiselle appeared to add her "Au'voir Monsieur, Merci Au-voir Madame, Merci," to that of her daughter—as they bowed us out. These friendly folk always made us feel, with their farewells, that they sped the parting guest, rather than the customer, despite the clink of silver in the till.

We drove home in the grey car to the old Chateau where we were billeted, promising to meet again. We shook hands all around, directing our new friends to the "Bains Museum," for they were indeed travel-

stained and weary. And, as we rang the bell at the high iron gate, home seemed suddenly less far away, although the dripping jasmine and clematis flowers that tangled along the wall above our heads were very much of France, and eagerly we rushed in to tell the news of the big American camp a few kilometres distant. And what a whirl of excitement swept the mess when we realized that we were no longer alone "Over There!"

A report of the joint convention of the Canadian Association of Nurse Education and the Canadian National Association of Trained Nurses has appeared elsewhere in this journal. The decision to have the Canadian nurses' memorial take the form of a monument at Ottawa will be welcomed by all. The following members of the C.A.M.C. were in attendance at the convention:

Matrons-in-Chief E. C. Rayside, M.H.S., M.R.R.C.; M. C. Macdonald; Matrons K. O. McLatchey, M.R.R.C.; L. C. Shaw, M.R.R.C.; B. J. Willoughby, M.B.E., M.R.R.C.; V. A. Tremaine, M.R.R.C.; S. W. Young, M.R.R.C.; J. Urquhart, M.R.R.C.; and E. B. Ross, M.R.R.C,

Nursing Sisters D. M. Binning, M. Brankin, L. M. Carter, A. M. Cooper, M. M. Dionne, C. Ferguson, Mrs. J. Fraser, A.R.R.C. (nee Nursing Sister G. McCullough); C. M. Graham, B. Lavallee, Mrs. Mahon, A.R.R.C. (nee Nursing Sister W. M. Byrne); J. MacIlroy, M. MacKenzie, A. MacNichol, A.R.R.C.; E. MacPhedran, I. J. Neilly, K. M. Panton, A.R.R.C.; S. Payne, Mrs. PoPulton (nee Nursing Sister M. MacDermott); L. A. Savard, E. J. Wilson.

Accompanied by a cousin, Matron-in-Chief Rayside, M.H.S., M.R.R.C., sailed for Liverpool by the S.S. Victorian, on June 24th. Their itinerary includes the cathedral towns and other points of interest in England, the highlands of Scotland and the lowlands of France. In France, Miss Rayside will review the battlefields, Paris, and the scene of former hospital glories. It is hoped her past war impressions will be duly recorded in these columns. Although primarily on holiday bent, Miss Rayside, with characteristic eagerness for further knowledge, purposes to acquaint herself with instructional methods as applied in the leading hospital training schools of London.

Whilst visiting in Ottawa recently, Matron K. O. MacLatchy, M.R.R.C., was the guest of her uncle, Sir Robert Borden, for a week. Later, in Montreal, Matron MacLatchy was the raison d'etre of several dinners and tea parties. Of the last, the most delightful was that given at the Mount Royal Club by Brigadier General H. S. Birkett, C.M.G., and Colonel J. M. Elder, C.M.G. This was in the nature of a re-union of the staff of No. 3 Canadian General Hospital, McGill, and was thoroughly enjoyed by all.

The marriage of Nursing Sister Edith Hegan, M.R.R.C., to Mr.

Basil Steed, took place at St. John, N.B., early in June. After the honeymoon, Mr. and Mrs. Steed will reside in Ottawa, where Mr. Steed holds an important position in Molson's Bank. Mrs. Steed was the recipient of innumerable cheques and other gifts of value.

An engagement of wide interest is that of Principal Matron Ethel Boultbee, A.R.R.C. Her fiance, Captain Jack Rose, of Vancouver, has also a distinguished record of Service; attached to an Infantry Battalion, he saw service in France and was prisoner of war in Germany for a time. He is a brother of Mrs. W. G. McIntosh, A.R.R.C. (nee Nursing Sister "Peggy" Rose). Thus will the Damon and Pythias fidelity of Nursing Sisters Boultbee and Rose become cemented by actual affinity.

Nursing Sister Helen Stewart has resigned her appointment at Deer Lodge Hospital, S.C.R., Winnipeg, Man.

Nursing Sister Nellie Chisholm has been taken on the staff of the above-named hospital.

Nursing Sister E. H. Humble is engaged in private duty nursing in Boston. Sister Humble went overseas with the Harvard Unit and subsequently joined the C.A.M.C.

Nursing Sister M. D. Ellis has an appointment with the Social Service Department, Lakeside Hospital, Cleveland, Ohio.

In the finals of the Public Health Course, Toronto University, two nursing sisters led in honors.

Nursing Sister L. Holland, A.R.R.C., has resigned her appointment in the Social Service Department, Montreal General Hospital, to take an important position at the Canadian Red Cross Headquarters, Toronto, Ontario.

Under distinguished patronage, a special gala performance of Biff! Bing! Bang! was presented by the Dumbells at the Ambassador Theatre, New York, on the evening of June 17th. It was given in aid of the British G.W.V.A. of America, New York Command. In the audience was noted Matron E. M. Wilson, M.R.R.C.; Nursing Sisters F. Kelly, A.R.R.C., and I. McB. Muir, A.R.R.C.

That it may serve as a source of further inspiration to all, and more especially to those who are still "carrying on," the following appealing tribute is published. It was written to Nursing Sister B. L. B. by a French Canadian patient—a man with a wife and nine children. His letter conveys a reverence of sentiment that is unmistakeable and betrays an intelligence of the heart that as surely surmounts that of the mind:

"Sistare:

"It is alwas my greatest plaisir to drop you a few words. I am still alive but my brett is not very good to-day. I was auperate again and I had a toffe time to get troo. Sistere I must tell you

the trute, I love you becaus you was like a mother to his child, you are alwas at my best thought and you will be at the last next to God."

from a sencer frend."

Among the passengers who disembarked from the SS. Minnedosa on the 26th instant was Matron-in-Chief E. C. Rayside, M.H.S., M.R. B.C. Whilst enthusing on the beautiy of Highland scenery and that of the Continent, Miss Rayside maintains that to her mind nothing is fairer than the voyage up our own St. Lawrence.

After spending the winter in California, Mr. and Mrs. C. A. Nolan (nee Nursing Sister C. M. Lister) have returned to their ranch at Redland, Alberta.

The marriage of Nursing Sister Ida Rose Kuntz to Mr. John Franklin Roche took place at St. Michael's Cathedral, Toronto, August 4th, 1921.

Captain and Mrs. John Gale (nee Nursing Sister Gertrude De Cow) are receiving congratulations on the birth of a daughter—Phyllis MacGregor Gale.

Nursing Sister S. M. Carr-Harris, A.R.R.C., Provincial Health Nurse, Ontario, is now in Fort William.

Nursing Sister M. Bagshaw, Provincial Health Nurse, is on extended leave owing to the serious illness of her mother.

Nursing Sisters Rose Hally, L. Whitworth, M. Riddle, A. L. Campbell and Marjorie Heeley, are also with the Ontario Health Department.

Nursing Sister M. E. Owen has been appointed Public Health Nurse for the town of Orillia.

Nursing Sister Agnes Forbes is Public Health Nurse at Niagara Falls, Ontario.

Nursing Sister Ann Cameron is Public Health Nurse at St. Thomas, Ontario.

Nursing Sister L. A. Gamble, A.R.R.C., and Nursing Sister Alison Dickison, M.R.R.C., have joined the Toronto Health Department.

Nursing Sister F. Conlin and Mary Darling have returned to Toronto from Los Angeles.

Nursing Sister M. McEvoy and E. F. Bradley are in San Francisco, after spending the winter in Los Angeles and Honolulu.

Nursing Sisters M. McCort, A.R.R.C., E Fraser and D. Dean, have institutional positions in a Los Angeles hospital.

Nursing Sister A. Field is on the staff of Brant Hospital, Burlington.

Nursing Sister E. McEachren, A.R.R.C., left Toronto to take charge of the operating room, Royal Alexandra Hospital, Edmonton, Alberta.

Nursing Sister S. M. Driver has entered the field of industrial nursing. She is in charge of the welfare work at Harris Abattoir, West Toronto. Nursing Sister B. Gibbons is her assistant.

Nursing Sister M. Richardson, A.R.R.C., is with the Wm. Davies Co., Toronto.

Nursing Sister Mary Craig was married in June to Mr. Cyril Waite. They are living in North Toronto.

Nursing Sister Maud Wilkinson, A.R.R.C., has completed the social service course, Toronto University, graduating in May. Miss Wilkinson is in charge of the Social Service Department, D.S.C.R., "D" Unit. Staff members are:—Nursing Sisters M. Townsend, F. Chartris, M. Doherty, I. Jennings, Oda Weldon, J. M. Cowan, D. Robertson, M Burgess, M. Kingstone, and C. Gardiner.

Nursing Sister Jean Milne is resident nurse at the Andrew Mercer Reformatory.

Nursing Sister Edna L. Moore, of the Provincial Health Department, Toronto, was recently deputed to visit Ottawa in the interest of health centres.

The Victorian Order of Nurses for Canada offers scholarships of $400.00 each to graduate nurses who wish to avail themselves of a post-graduate course in public health nursing at the Universities of Vancouver, B.C.; Toronto and London, Ontario; McGill, Montreal; and Dalhousie, Halifax.

Nurses accepting scholarships will be expected to remain in the service of the Victorian Order for one year upon successful completion of the course at prevailing salaries.

Application for scholarships must be made at the earliest date to the Chief Superintendent, 104 Sparks Street, Room 4, Ottawa; Miss Ethel Brown, 1250 Broadway, West, Vancouver, B.C.; or to Miss E. Ada Luxon, 344 Gottingen Street, Halifax, N.S.

Prospectus for universities courses may be had upon application to the universities.

The World's Pulse

By Elizabeth Robinson Scovil.

Teeth in New Zealand.

The teeth of children attending state schools in New Zealand are cared for by the government. Fifty qualified women dentists look after them for an hour and a-half each day. Special nurses are being trained for the work and to further the cause of dental hygiene.

Photographing Through Walls.

It is said that human bones and other objects have been photographed at 250 feet, with a brick and stone wall between the X-Ray apparatus and the object. There was a four-hour exposure. In 1896 it required eight hours' exposure to photograph, with the plate only ten inches distant.

The Extent of London.

Greater London contains 7,262,963 persons. London proper, the county, has a population of 4,522,962.

A Nation's Gift.

Earl Haig has received from the British people the gift of the historic estate and mansion of Bemersyde, near Melrose, on the banks of the Tweed. It has been the seat of the Haig family for 800 years. Earl Haig has recently been ordained an elder in the Presbyterian church.

A Voyage of Discovery.

Sir Ernest Shackelton is to start about the last of August on a 30,000 mile voyage of discovery among the little known islands of the Atlantic and Pacific and the uncharted seas of the south pole. He is to be accompanied by a small company of picked men, some of whom sailed with him on his former famous expedition.

The Chinese.

Col. Robert Loraine, the famous actor and airman, says that the Chinese are the gentlemen of the world. The average Chinaman is a gentle, kindly creature, a man of rare intelligence and charming personality. He discovered in China an actor, an impersonator of female parts, who far surpassed any similar impersonator whom he had known.

Airships by Night.

Airships are taking lessons in night flying from the bat. This creature, when flying, emits a continuous low note, which rebounds from any obstacle across its path, giving warning of danger. Instruments are being devised so sensitive that they will record visibly, before the airman's eyes, the progressive increase of sound, as the ground or any other obstacle approaches. Sound travels 12 or 14 times faster than the swiftest airplane, so the warning would be in time to be of use.

Women Rhodes Scholars.

St. Hilda's Hall, Oxford, wishes to reserve rooms for women from the Dominions, so that they may share in the advantages enjoyed by Rhodes scholars. An appeal is being made for the money needed.

Washington in England.

A statue of George Washington, presented to England by the State of Virginia, has been unveiled in Trafalgar Square, London. It is a replica of the statue in the State Capitol, at Richmond, Virginia.

Treatment of Cancer.

The authorities of the West End Hospital, London, state that cancer is being successfully treated in that institution by means of an improved application of X-Rays. The rays are of a wave-length outside the range of human vision. The highly complete electrical apparatus used was invented by a Bavarian radiologist. It has been carefully tested by experts. The treatment does not injure the patient in the slightest degree, and specialists believe that extraordinary results will be attained in the way of cures.

The Cunard S S. Company.

The Cunard Company, the first to begin regular steamship communication between America and England, had then, in 1840, a fleet of four vessels with a total tonnage of 4600 tons. It now has 169 vessels, totalling over a million tons, and serving the chief ports of the world. It has the largest ship afloat, the Berengaris, 51,000 tons; the Mauretania, 31,000 tons, holding the Atlantic speed record, and the Aquitania, now an oil-burning vessel, which has carried a greater number of passengers than any other ship.

The Cross at Vimy Ridge.

Arthur Meighen, Premier of Canada, unveiled the plain war cross erected on the height of Vimy Ridge to the memory of the Canadians who lie there. Fields of growing wheat cover the spot where the Canadians

stormed the crest of the ridge on April 9th, 1917. The children of Arras brought a wreath of red roses and evergreens, the base of the cross being a mass of flowers. Maples shade the graves, brought there that our dead may lie in the shade of the trees of their land.

THE NEED OF WORK.

American Cookery denominates the following "Sound but unpopular Doctrine."

"One of the most discouraging phases of the present tangle of industrial conditions is the ignoring of the fact that any wage that keeps up with the rising cost of living is an unfair wage. It seems to be generally assumed that to justify any demanded increase in wages it need only be shown that such an increase is necessary to maintain a pre-war standard of comfort.

"The years of the war devoted to destruction have dangerously exhausted the common fund upon which we all depend. It is not possible for all to enjoy the normal standard of living. Those who succeed in doing so succeed at the expense of the rest of the community. The selfish determination on the part of many to avoid their share of the common burden imposed upon all by the waste of our resources is the cause of the present economic unrest. . . . We have only to go on as we are going to commit industrial suicide.

"What a pity, when only a little common sense, a little mutual consideration, a little more work on the part of each one, would at once lead us out of this wilderness of folly."

As the London Spectator says: "What is the cause of the dangers that surround us? The lack of production, production, production and again production. This is the need of the hour."—*The News Letter.*

Hospitals and Nurses

MANITOBA

ST. BONIFACE HOSPITAL.

This hospital celebrated its 50th anniversary on August 24th by a special programme, not the least part of which was the reception given to the graduate nurses of the institution. Many of the Alumnae were present in the beautifully decorated rooms to testify to the high regard in which they hold their Alma Mater and the expressed hopes that even greater success may attend the future of the hospital.

Misses A. C. Starr, H. McColm and L. Tracy have returned from a visit to the east.

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SASKATCHEWAN

Miss Jean E. Browne returned recently from a most interesting year spent at King's College for Women, London. Members in attendance at the C.N.A.T.N. convention were most interested in the account given by Miss Browne of public health work, and nursing conditions in general in England and France.

It is with great regret that we announce the resignation of Miss M. J Fraser, as Superintendent of Nurses in the Regina General Hospital. After a short vacation, Miss Fraser went to take charge of the Wesley Hospital, Wichita, Kansas. The good wishes of her many friends in Saskatchewan follow Miss Fraser to her new home.

It is announced by the Board of Trustees of the Regina General Hospital that Miss Margaret B. Garrow (Auburn City Hospital, 1908), whose home is in Cobalt, Ontario, is expected shortly to take charge of the training school.

The resignation of Miss Gertrude Haines (Chatham General, 1912), from her position as Matron of the Lampman Hospital has caused very great regret in the community. Miss Haines has been in charge since the opening of their new hospital, and had very much endeared herself to all the people of the district.

Miss E. M. Turner (Winnipeg General, 1908) has recently com-

menced her duties as Lady Superintendent of the Sasckatoon City Hospital. Miss Turner is well known to Saskatchewan nurses, having been for a number of years Superintendent of Nurses of the Regina General Hospital. Her many friends wish her every success.

Miss Lily Gray (Montreal General) has recently accepted a position on the nursing staff of the Saskatchewan Sanitarium.

Word has recently been received at the Sanitarium of the marriage at Durban, South Africa, of Miss Minnie L. Mitchell to Charles Edward Johnstone, Zululand. Miss Mitchell, who is a graduate of the Carman Hospital, Manitoba, was recently of the nursing staff of the Sanitarium, and her many friends there wish her every happiness.

Miss Auld (Weyburn Municipal Hospital) has recently taken charge of the Rosetown Municipal Hospital; and Miss M. L. Bullerwell (Malden City Hospital) has taken charge of the Scott Municipal Hospital. Most splendid work for the people of the prairies is being done through the municipal hospitals of Saskatchewan, and the nursing profession is justly proud of the women who are doing their share in bringing the needed care and health to our people.

Miss Dorothy A. Harris (Saskatoon City Hospital, 1918), has recently left Saskatoon for Yuma, Arizona.

Miss Isabel Stewart, Supervisor of the Saskatchewan Red Cross outposts, is at present opening a new outpost at the Prairie River soldiers' settlement. This is the second outpost to be opened by the Red Cross in the newly settled parts of the province.

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BRITISH COLUMBIA

A general meeting of the G.N.A. of B.C. was held September 10th in the nurses' residence, Royal Jubilee Hospital, Victoria, preceded by a meeting of the Executive Council. The President, Miss Elizabeth Breeze, R.N., was in the chair. Matters of importance, such as reports of the convention in Quebec, given by Miss Breeze; reports on the closing of the club house, and progress of the plan to employ a travelling instructor were presented. The scholarship committee reported that they were ready to present names to be voted on by ballot to decide who should have the honor of obtaining the $1000.00 given by the Association. The vote was then taken, and Miss Mary Campbell, R.N., of the school nursing staff, of Vancouver, was declared to have the largest number of votes.

The needs of the Canadian Nurse magazine were presented by the President, who said that, following the resolution of the annual meeting

of the association, the question of increasing the annual fee to cover the cost of subscription to the magazine be brought up. After considerable discussion, it was resolved that ballots be sent to each member before the next general meeting and the decision would rest on the result of this.

Miss A. McLellan was re-appointed Convener of the Public Health Nursing Committee.

It was decided that $1000.00 from proceeds of the sale of the furnishings of the club house be held in trust for the national memorial fund of the C.N.A.T.N.

The resignation of Miss Josette Tolmie was regretfully received by the association, and letters of regret ordered to be sent to her.

After the adjournment of the meeting, refreshments were served by the Victoria G.N.A., and a delightful social hour followed.

The next examination for registered nurses in British Columbia will take place November 2nd and 3rd, 1921. Particulars to be obtained from the Registrar, 125 Vancouver Block. Applications must be in before October 2nd.

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Miss Florence Eaman, R.N., graduate of the Vancouver General Hospital, has accepted a position on the staff of the Kootenay Lake General Hospital, Nelson.

Miss Barrington, Superintendent of the Infants' Hospital, Halifax, passed through Vancouver on an extended holiday.

Miss Mary Ewart, R.N., has been appointed School Nurse for Point Grey, B.C.

Miss E. Kinney, who has been dietitian at the Vancouver General Hospital, has resigned her position and is attempting a new departure for Vancouver. She is opening the field as visiting dietitian, arranging the diets for patients who are not in hospital and planning them according to the prescriptions from physician in charge of the case.

BIRTHS

CAMPBELL—At the Vancouver General Hospital, Sunday, August 14th, 1921, to Dr. and Mrs. Glen Campbell (Kathleen Davis, V.G.H.), a daughter.

STEAD—At the Misericordia Hospital, Winnipeg, Man., August 18th, 1921, to Mr. and Mrs. George Stead (Miss Hofstrand, St. Boniface Hospital), a daughter.

DIXON—At Maple Creek, Sask., on August 26th, 1921, to Mr. and Mrs. A. L. Dixon (Miss Elizabeth G. Brockie, Grace Hospital, Toronto, 1909), a son.

MARRIAGES

MITCHELL-JOHNSTONE—At Durban, South Africa, on the 19th day of April, 1921, by the Rev. B. Evans, B.A., Charles Edward Johnstone, Zululand, to Minnie Lawrence Mitchell, Cullen, Scotland. Miss Mitchell is a graduate of the Carman Hospital, Carman, Manitoba.

ROBINSON-CALDER—On June 29th, 1921, at Beaverton, Ont., Ann McMillan Calder (Grace Hospital, Toronto, 1912), to Mr. Louis Harvie Robinson. Mr. and Mrs. Robinson will live at 317 High Park Avenue, Toronto.

HEATH-LACEY—At Toronto, on July 27th, 1921, Lorna Lacey, daughter of Mr. and Mrs. J. H. Lacey, Hillsburg Ont. (graduate of Grace Hospital, Toronto, 1920), to Mr. B. Roy Heath. Mr. and Mrs. Heath will live at Milestone, Sask.

ASHBURY-HAYCOCK—On August 24th, 1921, at St. Giles Church, Hamilton, Ont., Evelyn Haycock (Grace Hospital, Toronto, 1919), to Mr. Erland Ashbury. Mr. and Mrs. Ashbury will live at 1210 Hamilton Avenue, Detroit, Mich.

MOFFATT-EDGAR—On July 21st, 1921, at Vancouver, B.C., Gertrude Louise Edgar, daughter of Mrs. L. Edgar, Mimico Beach, Ont. (graduate Grace Hospital, Toronto, 1915), to Mr. Bernice D. Moffatt. Mr. and Mrs. Moffatt will live in Vancouver, B.C.

"Blighty in November"

Though the years are fast multiplying since the great war, yet how much time is spent dwelling on the varied scenes memory is ever recalling—base hospital and C.C.S. experiences; in each the daily round of duties, glorified by the humour, pathos and heroism of our brave men, interposed by "leave to Blighty." These memories all come floating by in turn with a vividness that nothing can ever obscure. Rather, as the poet Burns puts it:

"Still o'er these scenes my memory wakes
And fondly broods with miser care.
Time but the impression stronger makes
As streams their channels deeper wear."

Had we been allowed to choose the time, for a certainty leave would not be taken in dark and chilly November. But like a blast came the order—"Three Sisters get ready to leave for the United Kingdom at 7 a.m." The morning dawns cheerless and cold, the description also serves for the hurried breakfast, and we are off for a long ride in the ambulance. We might have taken it more leisurely, for we have to wait hours and hours for the train. No place to sit, so we must stand, or walk. Finally smoke appears in the distance and our hearts warm up somewhat, still we do not become too elated, for, though smoke is in evidence, it can still be another long wait before the train arrives at the station. It is darkening now, and it seems as if that old train has to feel its way. A Canadian boy was overheard remarking, "She is running smooth now, boys; she must be off the track." This may partially explain the French roads.

We arrive at Boulogne at 3:30 a.m. A Red Cross ambulance awaits to take us to the Canadian Red Cross Rest Home. Mental thanks were wafted towards the Canadian people out of whose generosity the Home was provided for all Sisters and V.A.D.'s arriving weary and hungry at this ever-crowded base. After an acceptable lunch, we had a good rest and felt refreshed and better prepared to continue our travels. What a treat not to have to tramp the cobble stones of Boulogne, seeking a shelter, as was the case before the Red Cross realized the need for a Rest Home. Of its Commandant and V.A.D. Staff, ever cordial and attentive, the kindliest recollections are retained.

As always, the leave boat was crowded. We tied each other up in life belts, for these were as imperative as travelling permits. If there is the slightest tendency to the dreaded mal de mer, you are not made more comfortable by this bulky life belt encasing your chest, and it must not be removed until the shores of England are reached. None too soon

could these shores come to view, for it was a rough voyage. Our escort had convoyed us safely over and now shot away to accompany other boats on this dangerous channel trip. At Folkestone, another busy port, the long trains are snorting as if anxious to get away. We run along from coach to coach watching for a foothold, but none presents. We turn and look back; we are panting for breath as our baggage gets more weighty, and we almost lose hope when a porter finds room for all three; never was recompense more gladly givn. When we get settled our eyes fasten on rural England as it unfolds its beauty in one long moving picture. It might be supposed that along this steel highway, where thousands pass in the trains each day, that the people would take no notice. Not so—here you evidence the pulse of the home as all along the line young and old never fail to wave a hand or give a cheer of welcome as the train whizzes by. This seemed a genuine expression of feeling towards those fighting for the Empire, and it was a daily, if not an hourly occurrence through all the years of war.

Now we reach London, old and wonderful, grim and gay; grim with its determination to win; yet gay enough to smile. You feel the spirit of the old place grip you; it is the great distributing centre, a haven of rest or a whirlpool of diversion as one chooses. Ireland was in prospect, but it took some persuasion on the part of the Irish member of the trio to induce us to leave terra firma. The churning of the channel was still fresh in our minds. However, the smooth Irish tongue of our sister prevailed.

There was no mistaking the country we landed in, for the blarney starts at the ports, and, travel where you will, it is ever present. In Dublin we had our first ride in a jaunting car, and "ould Paddy" insisted that we make a wish before entering his car, "fer good luck." All the while he entertained us with rare bits of information and history. As to its truthfulness we could please ourselves. Now and again little spurts of Sinn Fein sentiment burst forth. It could not be repressed; when we alighted and asked the fare—do you suppose Paddy had a regular tariff? No! You could not induce him to commit himself to a fee. "I'll jist be lavin' it to yersilves" was all he would say, and "Thank you, and God bless you." When we parted, with what we found out later was three times the tariff charge, he took it all unabashed, and "niver a twitch of his ould face." We now proceeded to Belfast, of much more prosperous and more modern appearance than the capital. I once heard that Ireland was the wealthiest country in the world! because its capital was always doublin. We failed to see any evidence of this in the south. Bound for the farthest point on our warrants, we proceeded to the Giant's Causway, and, much to our surprise, though well on in November, the sun was there to brighten that rugged northern coast. It brought back school days when we studied about this wonderful rock formation, and there they stood, numberless diagonal pil-

lars. One group formed an object like the pipes of a great organ. Here, too, is a Wishing Chair, of the same rock, and you must not leave until you sit in it and make a wish (most likely that the return passage to France may be smooth!). From Killarney to the most northern coast, superstition abounds. Our sister of Irish descent was loath to leave the shores of Erin. As soon as she set foot on the ould sod, her nature changed, and no matter what happened all was lovely; disagreeable events (though few), such as being generously splashed with mud by a passing jaunting car, she looked at through rose-coloured glasses, and in her state of mind each splash was a little bit of good old Ireland. So the time passed by, and we enjoyed every moment listening to the Irish tongue. In Belfast we parted, and I went to Scotland to visit friends. Arriving there it was necessary to take a 'bus to reach my friend's home. When it seemed we had gone miles, I enquired the fare and was told 6d. This seemed such a very small charge, so I gave one shilling and thought it well worth it. Though it was dark, the driver said, "I think, Miss, ye hae gien me too much." What a contrast to Paddy, who would be "lavin it to yersilves." Being of Scotch descent, it was now my turn to feel the auld blood of ancestry surge through my veins. Even in the darkness, it thrilled me to know and feel I was really in this great unconquered country. Aye, but I felt proud when I brought to mind the famous people of auld Scotia and the noble, stirring history she has bequeathed her children. This was only a passing visit, and I shall but recall my warm reception, and the time-honored scenes and Scotch sweets with which I was treated. I must now pass on to meet my pals in London. Reaching the great city again, we wend our way to Waterloo—the great throbbing Waterloo. Surely no place in London witnessed more pathetic scenes during the war than these great pulses of London—Waterloo, Victoria and Charing Cross Stations. The engines are snorting and puffing in seeming impatience. Soldiers in khaki at every turn. For many it may be the last leave, but all are bright and cheery, knowing that the hearts of those left behind are strained and saddened; yet they, too, are smiling. Strange how that old war was fought, also by those dears ones at home. Crossed swords, brass hats, crown, stars and privates mingle together—all with a common thought—the winning of the war. Women porters trundle their heavy trucks of baggage through the crowds, doing their bit with a will. Red Cross Y.M.C.A. and Salvation Army are willing workers, serving hot tea and coffee to our ever-hungry troops. Here it comes! The people press forward, what a stir! It is a leave train coming in! Soon it is emptied of its precious cargo; the scene changes to smiles and tears of thankfulness and joy as all along the length of the train little groups gather to welcome their own. Others look for no one, but rush on to the nearest tube to hurry them on to other stations to catch the first train for the home where awaits their welcome.

A continuous show was enacted at these stations during the war. Sadness and gladness followed in quick succession. Our train is ready now. The guard's whistle gives the warning. These last moments become tense; there is almost a silence, for thoughts are unexpressed, as words choke just now. So, as we begin to move off, heads are thrust out for a last look and the "cheerio" which, to many hearts, is now naught but a cherished memory. We are away. The outlook en route, with the fine green meadows and wooded hills, must be an inspiration to those fighting for their homes in England, and we agreed with the Tommy who, as he views the panorama, turns to his mate with the remark, "I si, mitie, hits nice to see they int now shell 'oles 'ere." Matey must have had a bad trip coming over, and it was still preying on his mind, for he answers, "Hif this 'ere wind keeps on a blowing, we'll see plenty of 'em crossin' the bloomin' channel." The wind did keep up, and we were told to report three times at the boat before it ventured out, and ere long we wished they had left us on land for another day. More crowds, more sickness, more life belts, the same old story, each one on his or her own with no sympathy from any quarter. At such times lack of sympathy is the kindest sympathy. None too soon, the welcome lights of France now began to glitter and gleam, then out of sight, only to reappear as we are lifted high and low on the waves—hope revives, however, and, when we land, no need to describe our looks or feelings; we wonder if leave is really worth while. Then we recall the joys of "Blighty," and away down in our hearts we decide it was much worth while.

We are soon at hospital and duty, the spirit willing enough, but the flesh somewhat weak. In my next ward I shall recommend that an extra week be given in which to recuperate from leave!

Once back at our post (what pride there is in these two words—my ward!), fatigue vanishes. New patients are admitted, our own patients; we make them comfortable and happy and—well there was nothing finer over there than your own ward of Tommies, Jocks, Paddies, Aussies, Anzacs and Canucks, with a sprinkling of Taffies. Any combination of these ingredients assured a varied and original discussion.

Close your eyes but a moment. What familiar scenes does fancy conjure! Scarlet-tie-d knots of "blues" dotted over hospital wards in France. A comparatively silent, much-bandaged group playing cards on the edge of a comrade's bed; another few intent upon a game of draughts; one or two or more upon reading. The liveliest lot of all is that clustered around the stove; they hem it in on all sides as though the poor inanimate old thing contemplated flight. What battles have been lost and won upon this favoured ground! Here "fags" seem the most essential weapon. Quip and jest is thrust and parried. With what flourish does the poker punctuate debate! The thickening atmosphere reeks with tobacco; how immaterial is fresh air! Nor has the incessant grind of

the gramaphone power to drown argument. Only by the call to supper is the magic circle dispersed. I, too, must rub my eyes, blow the smoke of memory aside, for right here the bonniest blue of all is patiently awaiting his dinner.

ONE OF THE NEIGHBORS.

ETERNAL YOUTH.

So long as there are songs for me to hear,
Book friends to find, or opening buds to see,
A chime of bells, or robins nesting near,
A poem rare that frees the soul of fear—

If still, for me, the lilac's breath is sweet,
Or ships that span the waves leave waiting dreams,
So long as need my heart goes forth to meet,
And each new day lays duties at my feet—

While I yet feel the claims of lands afar,
And sacrifice to make them unafraid,
If not my own nor loved ones' lives I bar
From service where both truth and honor are—

And still can glimpse the rainbow's hues for me,
Or children's smile in answer to my own,
While yet alive are love and sympathy
With joyousness, and dreams of things to be—

Then, though advancing years reap without ruth,
I am not old while days hold values new;
And life's last link shall clasp the glowing truth
That welcomes Home the soul's eternal youth.

Ida Norton Munson.

"There are rare epochs in the history of the world when in a few raging years the character, the destiny of the whole race is determined for unknown ages. This is one. The winter wheat is being sown. There are many storms to pass through, there are many frosts to endure, before the land brings forth its green promise. But let us not be weary in well doing, for in due season we shall reap if we faint not."

—*Lloyd George.*

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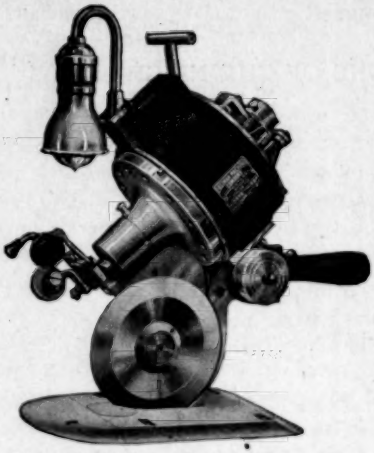

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Leave unto thy Lord the rest.

—*Anonymous.*

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Regular Meetings—First Friday of each month.

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Regular Meeting—Fourth Thursday of each alternate month at 3 p.m.

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Entertainment Committee—Mrs. Worrell, Mrs. Leavens, Miss Morrison, Mrs. Cooper.

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Regular Monthly Meeting—Last Tuesday, 2.30 p.m.

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Regular Meeting—Second Wednesday, 8 p.m.

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Regular Meeting—First Monday, 3 p.m.

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Regular Monthly Meeting—Third Wednesday at 8 p.m.

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Regular Monthly Meeting—Second Wednesday, 8 p.m.

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—*Anonymous.*